

ISSUE SLIP STAPLE AREA (for additional cross references)

1500 8-31-98

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SM		
O.I.P.E. CLASSIFIER		8	6-19-98
FORMALITY REVIEW	17	69607	6-22-98

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	6/1/98
2	✓	✓	6/1/98
3	✓	✓	6/1/98
4	✓	✓	6/1/98
5	✓	✓	6/1/98
6	✓	✓	6/1/98
7	✓	✓	6/1/98
8	✓	✓	6/1/98
9	✓	✓	6/1/98
10	✓	✓	6/1/98
11	✓	✓	6/1/98
12	✓	✓	6/1/98
13	✓	✓	6/1/98
14	✓	✓	6/1/98
15	✓	✓	6/1/98
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18	✓	✓	6/1/98
19	✓	✓	6/1/98
20	✓	✓	6/1/98
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22	✓	✓	6/1/98
23	✓	✓	6/1/98
24	✓	✓	6/1/98
25	✓	✓	6/1/98
26	✓	✓	6/1/98
27	✓	✓	6/1/98
28	✓	✓	6/1/98
29	✓	✓	6/1/98
30	✓	✓	6/1/98
31	✓	✓	6/1/98
32	✓	✓	6/1/98
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here